

2014 Message from the Air Force Personnel Center Physician Education Branch Chief

Air Force Active Duty Applicants,

As you begin the application process for residency or fellowship training, I want to congratulate you for your accomplishments up to this point in your medical career. You are among the best and brightest physicians in our nation, and we are proud that you have chosen to serve in the Air Force. The Air Force Personnel Center (AFPC) Physician Education Branch stands ready to assist in any way we can to help you make the best decisions about your AF medical career.

Every year, the Air Force (AF) projects how many physicians in each specialty are required to meet the needs of the Air Force Medical Service (AFMS). This process, called “forecasting”, is completed each year by the Health Professions Education Requirements Board (HPERB). The number of physician training requirements forecasted for each specialty is posted on our web page. These are the positions that will be selected at this fall’s 2014 Joint Service Graduate Medical Educational Selection Board (JSGMESB). As is the case in the civilian match, some specialties are more competitive than others.

The attached application instructions are very complete. Please read them thoroughly prior to beginning your GME application. I would like to highlight a few issues regarding the application process.

- ❖ You are responsible for submitting all application documents into the Medical Operational Data System (MODS). Please see our website for directions on how to upload your documents into MODS. Do not mail or email any documents to Physician Education!
- ❖ Air Force Personnel Center (AFPC) Physician Education **will not** have an extended call for applications beyond **14 September**. **Please ensure you meet the deadlines for all application items to arrive to our office by 14 September.**
- ❖ **JSGMESB deadlines are firm.** MODS will be closed after 14 September and your application will not meet the JSGMESB if your application is incomplete. Scanned or mailed hard copy applications will not be accepted. It is your responsibility to meet the deadlines.
- ❖ If you are selected for GME, you must meet all conditions prior to being released to GME. Those conditions include passing USMLE/COMLEX Step 3/Level 3 for interns, passing your AF Fitness Test, etc.
- ❖ For previous JSGMESB applicants, due to automation processes, AFPC Physician Education requires you upload new copies of Dean’s letters, transcripts and USMLE/COMLEX scores into MODS. Even if you sent copies in previous years, you are responsible for obtaining a copy of these items and uploading them into MODS. Members are encouraged to maintain copies for their personal files for future use and any future GME applications.
- ❖ Applicants must apply to, and be selected by, the 2014 JSGMESB to enter a GME program. The training opportunities available at the JSGMESB are specific in terms of the number of training years, locations, and funding. Active duty service commitments (ADSC) will vary according to the type of funding (AD program, civilian sponsored or civilian deferred) and the existence of previously incurred educational ADSC. Applicants may not seek residency or fellowship training that contains an MPH curriculum unless already approved by the HPERB.
- ❖ Current interns (post-graduate year 1, PGY1) selected for residency training will be required to have taken the USMLE Step 3/COMLEX Level 3 by **15 Mar 2015**. Although a Step 3/Level 3 score is not required at the time of the JSGMESB, a specific test date to take the examination will be required as a part of the JSGMESB application. Applicants must provide AFPC Physician Education their Step 3/Level 3 scores **NLT 30 Apr 2015**. If selected for GME, the selection will be contingent upon passing Step 3/Level 3.

- ❖ Applicants applying for, or who wish to be considered for, civilian training should enter the appropriate civilian match process. Applicants must withdraw from the match if selected for training in an AD program by the JSGMESB.
- ❖ When applying for civilian sponsored training and interviewing with civilian programs, you should provide a copy of the AFIT Training Agreement (TA), in advance, to the prospective civilian institution, to ensure they can agree to the terms and to prevent later delays in processing your GME assignment. Please direct any questions regarding the content of the TA to the AFIT POC listed on the first page of the agreement. The AFIT TA can be found on the AFPC Physician Education website.
- ❖ You must complete an interview (preferably in person) with one active duty AF Program Director (or Consultant if the AF does not have a program) in the specialty you are applying, regardless of whether you are applying for an AD, civilian sponsored, or civilian deferred GME program.
- ❖ AF Program Directors/Consultants may only review a copy of your Department of Defense (DoD) application and curriculum vitae (CV). They may not request additional materials such as photographs, essays or letters of recommendation.
- ❖ Overseas applicants only: Applicants with Date Eligible to Return from Overseas (DEROS) curtailments greater than 12 months to enter GME are ineligible to meet the 2014 JSGMESB. Individuals with curtailments <12 months and whose DEROS month is after June of the requested training year will require a DEROS waiver from AFPC Physician Education to accompany the application. Do not initiate any DEROS curtailment requests at your base.
- ❖ Civilian programs under the jurisdiction of LA County (LAC)/Univ of Southern California require a separate Training Affiliation contract, in addition to the AFIT TA. Please refer to the section of this application under Civilian Sponsored Training, paragraph c, for additional guidance.
- ❖ You must adhere to AF fitness standards. If you have an unsatisfactory score, this may impact your ability to compete for your specialty choice in residency training. The JSGMESB President will review all “unsatisfactory” fitness applicants and approve selection for GME on a case by case basis.
- ❖ Applicants selected for civilian training, who secure a program in CA, must be aware that CA mandates all trainees to possess an active CA medical license, prior to training start. Plan accordingly.

These remarks are meant to highlight some key points. There is additional detailed information in the instructions accompanying the application forms. We have teamed with the AFPC Total Force Service Center to provide 24/7 assistance via the myPers website and their telephone line. You may contact them at 800-525-0102 or <https://mypers.af.mil> for application assistance. For additional assistance, you may contact my staff at DSN 665-2638, 210-565-2638 or 800-531-5800. My Program Managers stand ready to assist you with your application. I wish you the best with your application and your future GME training endeavors!

Michael S. Tankersley, MD

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United States Air Force
2014 Joint Service Graduate Medical Education Selection Board Application
<https://kx.afms.mil/afphysicianeducation>

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24/7 Application Support AFPC Total Force Service Center:
800-525-0102

Summary of the 2014 JSGMESB Timelines

Deadlines

<p>All items must be uploaded into the Medical Operational Data System (MODS). DO NOT MAIL/EMAIL DOCUMENTS!</p> <ol style="list-style-type: none"> DoD two-page application for GME (DPANE Form 4117) You must also send the 2-page DoD Application and CV to all AF Program Directors (or Consultant if no AF program exists) in the specialty you are applying. MPH supplemental form (applies to RAM applicants only) Curriculum vitae (CV) Current unrestricted medical license USMLE Step/COMLEX Level 1, 2, and 3 scores (copy of official board transcripts) You must submit all board test scores to include failed scores. If you are retaking the Step/Level 3 you must send Physician Education your retake test date. Step/Level 3 intention form (if applicable) Medical student performance evaluation (MSPE) – formerly known as Dean’s Letter Official copy of medical school transcript (including degree award date) Commander’s letter of recommendation (staff applicant’s only) DEROS letter of intention (overseas applicants only) Two personal letters of recommendation Last five OPRs/Training Reports, as applicable Personal essay Second choice form Fitness statement Statement of understanding 	<p style="text-align: center;">14 September 2014</p> <p>Note: Once you have uploaded an application document into MODS, you will receive an automated email acknowledging entry of your document. Contact Physician Education if you have not received an email <u>after 2 weeks</u> of uploading your document(s).</p>
<p>Last day for requests for training <u>location</u> changes Applicants may request a change to training <u>location</u> (not specialty) preferences. -All changes must be submitted via email to Physician Education and on the second page of the DoD application for GME (DPANE Form 4117) -No changes will be made by telephone</p>	<p style="text-align: center;">15 October 2014</p>
<ol style="list-style-type: none"> Current Program Director recommendation form (if currently in training) Previous Program Director recommendation form (for each program previously attended) Program Director/Consultant interview sheets (uploaded into MODS by PD/Consultant) 	<p style="text-align: center;">15 October 2014</p>
<p>Last day for applicants to withdraw application (Must submit request via email to Physician Education)</p>	<p style="text-align: center;">1 November 2014</p>
<p>JSGMESB selection results released via email</p>	<p style="text-align: center;">17 December 2014</p>
<p>Written notice to all applicants</p>	<p style="text-align: center;">NLT 31 January 2015</p>

JSGMESB Checklist for Success

This checklist outlines all documentation required to complete the JSGMESB application. Please review the JSGMESB Overview and Application Guidance sections for detailed explanations/instructions on each requirement. **All application documents MUST be typed and uploaded into MODS** (fax/email/hard copy documents will not be accepted).

The following documents are due 14 September 2014 and must be uploaded into MODS by the applicant

1. _____ DoD two-page application for GME (DPANE Form 4117)
2. _____ MPH/MS supplemental form (applies to RAM applicants only)
3. _____ CV
4. _____ Current, unrestricted medical license (applies to residents/fellows PGY3+ and field applicants)
5. _____ Copy of USMLE Step/COMLEX Level 1, 2, and 3 scores (official USMLE or NBOME transcripts only; web score reports will not be accepted)
6. _____ Step/Level 3 intention form (if applicable)
7. _____ Medical student performance evaluation (MSPE, formerly known as Dean's letter)
8. _____ Official copy of medical school transcript (including degree award date)
9. _____ Commander's letter of recommendation (field applicants only)
10. _____ DEROs intention letter (overseas applicants only)
11. _____ Two personal letters of recommendation
12. _____ Last five OPRs/TRs, as applicable
13. _____ Personal essay
14. _____ Second choice form
15. _____ Fitness statement (fitness date must be since 1 Apr 2014 or indicate "Excellent" with date since 1 Sep 2013)
16. _____ Statement of understanding

The following documents must be uploaded into MODS NLT 15 Oct 2014:

- _____ Current Program Director recommendation form (if currently in training)
- _____ Previous Program Director recommendation form (for each program previously attended)
- _____ Program Director/Consultant interview sheet (complete your interview by **10 Oct 2014**; PDs/Consultants will upload the interview sheet into MODS)

Section 1: JSGMESB Overview

Active Duty Graduate Medical Education (GME) Application

Please read all instructions prior to completing any part of the application package. Compliance with these instructions will expedite the processing of the application and afford the opportunity for GME selection.

Training Opportunities

The Health Professions Education Requirements Board (HPERB) convened 20 May 2014 and identified GME training opportunities based on AF requirements. Only apply for training in specialties that have training requirements identified. If a desired specialty is not listed in the HPERB results, do not submit a GME application. If an application is uploaded into MODS for a specialty not identified in the HPERB results, the application will be returned without action and will not meet the JSGMESB.

An applicant may not enter GME (this includes extended training such as RESEARCH) unless he/she has applied to and has been approved for training by the JSGMESB. The results of the HPERB indicate a specific start year for training. Some training is approved two years in advance. Please pay particular attention to the specific start dates identified by the HPERB.

Applicants applying for HPERB-approved civilian training must request training in specialties reviewed and approved by the Accreditation Council for Graduate Medical Education (ACGME) or the American Osteopathic Association (AOA). Applicants are encouraged to review the American Medical Association's FREIDA Online and information published by the AOA for Osteopathic Training Programs. Applicants may not apply for dual programs (e.g. Med/Peds) not approved by the HPERB. A copy of the HPERB results is posted at <http://www.afms.af.mil/physicianeducationbranch/index.asp>.

Applicants applying for HPERB-approved civilian training should enter the National Residency Match Program or its osteopathic equivalent. Fellowship applicants will need to refer to the 2014 Specialties Matching Service schedule to enter the match. If selected for a military GME program, applicants must withdraw from the match. The JSGMESB release date is **17 December 2014**.

Applicants must understand that if selected for training, the training will begin and end at the same training institution. Requests to divide training between two or more facilities (whether it is a request to PCS or member's offer to pay for moving expense) will NOT be approved.

Applicants must rank ALL active duty (AD) GME programs in which the HPERB has authorized training for the respective specialty in which applying (e.g. Internal Medicine applicants MUST rank SAUSHEC, Wright-Patterson/Wright State, Keesler and David Grant/UC Davis on page two of the DoD application for GME).

UIF and Control Rosters

a. A physician that has a recently published Article 15 or unfavorable information file (UIF) is not automatically rendered ineligible to apply for GME. However, the application will require a waiver to the JSGMESB. Physician Education will administratively prepare the waiver. Applicants with a UIF must obtain their MDG/Facility Commander's (CC) written recommendation/approval to submit an application to the JSGMESB. This approval must be uploaded into MODS on unit letterhead addressing the UIF and must be signed by the MDG/Facility CC. The JSGMESB will take the MDG/Facility CC's recommendation into consideration when making their selection. The application will not meet the JSGMESB process without the MDG/Facility CC's recommendation addressing the UIF.

b. If the applicant is selected for GME and subsequently placed on a UIF prior to entering GME, the applicant's commander must submit a written recommendation to Physician Education with a specific recommendation of whether the applicant should enter GME. The JSGMESB President is the final approval authority on whether the applicant will be authorized to enter training. However the Board President relies heavily on CC recommendations.

c. Applicants on a control roster are ineligible to apply for or enter GME. If an individual is on a control roster at the time of submitting a GME application, the application will be removed from MODS and will not meet the JSGMESB. If an applicant is selected for GME training and is placed on a control roster prior to entering GME, the training offer must be withdrawn and the assignment cancelled.

Promotion

Applicants who have been non-selected for promotion to Major or Lt Col are ineligible to apply to the JSGMESB. Non-selects for promotion to Col are eligible to apply. If the application is uploaded into MODS, and it is determined that the applicant has been non-selected for promotion to Maj or Lt Col, the application will be removed from MODS and will not meet the JSGMESB. If the applicant is selected for GME and subsequently non-selected for promotion to Maj or Lt Col prior to entering GME, the JSGMESB training offer will be withdrawn. The physician may re-apply upon selection for promotion to the next grade.

Colonel (Col) or Col Select Applicants

Applicants in the rank of Col or already selected for promotion to Col are ineligible to apply to the JSGMESB. There are no waivers on this policy. If you are selected to Col after being selected for GME at the JSGMESB, your GME offer will require AFPC coordination with the Colonel's Group (DPO). ***Lt Cols are not encouraged to contact the Colonel's Group, as their assignments are not made until formally selected for Colonel.***

Time on Station (TOS) and DEROS Requirements

If currently assigned within the Continental United States (CONUS)

If the applicant is a staff physician at a continental U.S. (CONUS) assignment, he/she must have served as a staff physician at that location for the minimum time on station (TOS) requirements for a PCS. According to current TOS requirements, two years is the minimum TOS to PCS (if selected for training) without a waiver. Additionally, the AF Surgeon General's policy requires at least two years TOS (in a staff position – not in training) prior to entering/re-entering an initial residency. TOS < two years will require a waiver to accompany your application to the JSGMESB. Physician Education will initiate the waiver process and no administrative action is required by the applicant. Applicants who have close to two years TOS will require a short waiver which is commonly approved (i.e. TOS 22-23 months). However, each waiver will be considered on a case by case basis by the Board President. Also, if selected by the Board President, the waiver will be considered post-board by the appropriate approval level at AFPC. Any physician is eligible to apply to the JSGMESB with a TOS waiver, although you are most eligible when you are close to the two year TOS (i.e. 22-23 months) requirement. Plan accordingly and contact Physician Education for additional questions not addressed above.

If currently assigned outside of the Continental United States (OCONUS)

Any applicant requiring a DEROS waiver of >12 months is not eligible to apply. Applicants stationed OCONUS are expected to fulfill their OCONUS commitment and are not eligible to move before their DEROS. DEROS waivers for 12 months or less are granted on a case by case basis (typically 90 days or less is approved). Applicants are most eligible for GME selection to coincide with their current DEROS (i.e. an applicant with 2015 DEROS is most eligible to apply to the 2014 JSGMESB for a 2015 start).

Waivers are reviewed on a case by case basis by the Board President. You will require a DEROS waiver if applying for a 2015 start and your DEROS is later than June 2015. Typical AD orientation report dates are 6-9 June. Therefore, if you wish to depart your OCONUS base outside of your current DEROS month (e.g. May

2015) you will require a DEROS curtailment waiver. Again, waivers will be considered on a case by case basis by the Board President. If selected at the JSGMESB, applicants will not be able to accept a GME offer until AFPC approves the waiver after the JSGMESB. Additionally, if your DEROS is before May of the requested year of training, you may require/qualify for DEROS extension to coincide with training (e.g. DEROS 2014 applying for 2015 start). Contact Physician Education if you have questions. Please note: All administrative aspects for preparing the waiver will be initiated by Physician Education upon receipt of the GME application package and the Commander's DEROS intention letter. If selected for training, and the waiver is approved, the DEROS (as indicated by your Commander) will be updated by Physician Education at the time the assignment is loaded.

DEROS Letter of Intention

The DEROS letter of intention is required for all physicians assigned OCONUS who will require a DEROS curtailment waiver. The letter is signed by the applicant's Group Commander with MAJCOM/SG coordination which makes a recommendation on supporting the waiver and indicates the earliest date the Group Commander is able to release the applicant if selected for training. Guidance regarding the "Letter of Intention" is included in Section 3. **PLEASE NOTE:** GME training sites typically require a three-week orientation prior to the start of training with a **report date around 6-9 June**. If selected at the JSGMESB and the DEROS waiver is approved by AFPC, the applicant will not be permitted to PCS prior to the "earliest release date" recommended by the applicant's Commander. No changes can be made to the release date after the waiver is approved at AFPC. Please keep this in mind when requesting your DEROS letter of intention from your Commander. Typical report dates are between 6-9 June. **If selected for training and the DEROS waiver approved, Physician Education will update your new DEROS (as indicated by your Commander in the letter of intention) at the time the assignment is loaded.**

Retainability and Years of Service

a. Applicants must ensure they have the retainability to complete the training and any associated active duty service commitment (ADSC). For those with ADSCs sooner than the start of GME training, applicants must extend their current ADSCs prior to entry into training.

b. The National Defense Authorization Act of 2005 (NDAA-05) mandated all eligible reserve officers to be converted to a Regular Commission effective 1 May 2006. This allows all eligible AD officers the option to retire from AD and allow for more than twenty years of AD service. **If a physician has a mandatory date of separation due to rank or age restrictions that will be prior to the ADSC associated with training, then the physician is ineligible to enter training.** Please contact Physician Education for further guidance.

Fellowship Training

a. Board certification in the applicant's primary specialty is required to apply for and enter fellowship training. In some instances, applicants will not have had an opportunity to obtain board certification (e.g. applying to enter fellowship immediately following residency training or specialties that take two to three years post-residency graduation to obtain certification). Staff physicians who have not obtained board certification will require a waiver to the JSGMESB. This waiver will be prepared by Physician Education. Board certification waivers are considered on a case by case basis. Board eligible staff physicians who have not attained board certification must address this in the last paragraph of their statement.

b. All sponsored fellowships will incur a consecutive (not a concurrent) ADSC. Fellowships at military training facilities incur a consecutive obligation to any unfulfilled GME ADSC (i.e. a residency ADSC). Fellowships in civilian sponsored status incur a consecutive obligation to the longest medical education and training ADSC the member has prior to entry into GME. ADSC obligation is not paid off while in GME training.

Applicants Currently in PGY1-only Training and Current Residents Selected for Fellowship Training

Current interns in a PGY1-only program from 2014-2015 are encouraged to re-apply to the 2014 JSGMESB for consideration for categorical residency with a 2015 start. If selected for additional GME, applicants will be expected to successfully meet all requirements of their current program before being released for further training. It is **not** expected that applicants will report to orientation on established reporting dates. Release from your current GME training program will be effective the date you meet completion requirements.

Applicants should expect to report later than those not coming out of GME. You will be instructed to have the Program Director submit documentation to Physician Education regarding the specific date you have met the requirements. This will establish your new reporting date.

Active Duty Military Training

Applicants are reminded that individuals selected for AD military programs incur for the length of training, year-for-year commitments to be served concurrently with the remaining HPSP or Financial Assistance Program (FAP) commitment. In some instances where the commitment for the program is longer than the sponsorship commitment, applicants will incur the extra obligation (e.g. 4-year HPSP student who is selected for a 7-year neurosurgery residency).

Redeferred (Non-sponsored, Unfunded) Training

AF training requirements may exceed the availability of sponsorship. For certain specialties, an option may be available to request training in redeferred status. Physicians applying to civilian training programs do not need an acceptance letter prior to the JSGMESB. Individuals may choose to speak with civilian Program Directors prior to the JSGMESB but must make it clear to each Program Director that acceptance of any training offer is contingent upon official written notification by the Air Force following the JSGMESB. Applicants negotiating with a civilian Program Director and have a tentative offer in writing may upload into MODS a “Good Faith” letter for inclusion with their application. This letter does not guarantee selection but shows the JSGMESB that should you be selected, you have secured a program. Civilian programs are limited to the continental United States.

AD physicians requesting re-deferment should carefully consider the following factors when deciding to accept a JSGMESB offer for training in a non-sponsored, unfunded status:

- a. If an offer of re-deferment for training is made, the applicant must understand that he/she will separate from the AF and be assigned to the non-participating Individual Ready Reserve (IRR) in order to enter training. Members are considered in a leave of absence status during training with a remaining obligation to the AF for any previous costs expended (e.g. ROTC, USAF Academy, HPSP, and/or FAP). If you are selected for a civilian re-deferment, you receive a salary from the training institution.
- b. If an applicant is selected for and accepts re-deferment, the process for requesting separation should begin late winter/early spring of the year of training (i.e. the applicant should start the process immediately in Jan 2015 when the JSGMESB offer letter is received for a July 2015 training start date.) The separation process starts with the applicant’s initiation of Request for Separation through the Virtual Military Personnel Flight (vMPF). Further guidance will be included with the JSGMESB offer letter. Please keep in mind that date of separation (DOS) will be one day prior to the training start date, not orientation start date (e.g. for a 1 July 2015 start, the DOS will be 30 June 2015). In order for the applicant to move/report in time for training, the applicant is advised to accumulate as much leave as possible (recommended 15-30 days) and request to take terminal leave if able.

c. Applicants who separate the AF to enter training in redeferred status are authorized a funded military move to their documented "home of record." If the applicant will not train in the same state as their "home of record" then the applicant may be required to fund part of the move. It is recommended that the applicant plan ahead for this contingency. The applicant should contact their local Traffic Management Office (TMO) for further guidance. When the applicant re-enters AD, they will receive a fully funded move from their training location.

d. Applicants who separate the AF will re-enter AD in the specialty in which they trained under the re-deferment program. Upon re-entry, they will begin fulfilling any remaining medical education/training ADSC incurred prior to separation. Applicants must have a minimum of two years retainability prior to separating under the re-deferment program. If not, members will incur a two year concurrent ADSC for redeferred training.

e. Important: Applicants listing redeferred training as their first choice when there are AD locations available at the JSGMESB must indicate their reasons for doing so in their statement. If extenuating circumstances exist, you must provide source documentation (e.g. an ill parent, family member, etc).

f. Applicants **cannot moonlight as an obligated officer while in redeferred status**. Members and their Program Directors will be required to annually sign a statement to this effect. See section on moonlighting.

g. Applicants selected for redeferred training starting in **2015** must provide an original letter of acceptance for that program by **10 April 2015**. Do not submit a letter of acceptance from more than one training facility. Letters of acceptance must be from the Program Director indicating the training specialty as well as the start and graduation date of training. If Physician Education does not have a letter of acceptance by **10 April 2015**, the offer to enter training may be withdrawn.

h. Applicants who have completed their second postgraduate year (PGY2) must possess a current, unrestricted state medical license. Please ensure that your current license specifies the state where licensed and the license expiration date. Note – Applicants who have completed their PGY2 may not meet the JSGMESB without a current unrestricted state medical license. A training/resident's license is not adequate to meet this requirement. Please ensure your license is current and that you regularly renew it so that it is ALWAYS current the remainder of your training and subsequent AF career.

i. Transfer of Post-911 GI Bill benefits to children incurs a four year ADSC. If an applicant has not fulfilled this four year ADSC, they will have to restart the four year ADSC upon returning to AD after redeferred training. If funds have already been expended for children using this benefit, the applicant could be subject to recoupment.

Redeferred Effects on Promotion

The applicant should understand that if he/she has been promoted to the next higher grade with a scheduled pin-on within the first year of redeferred training, and he/she is considered by the JSGMESB for GME selection, then the applicant will be offered **civilian sponsored (AD funded) training**. He/she may accept or decline training. If declined, they will stay on AD, be promoted to next higher grade and will be eligible to apply to a future JSGMESB.

If an applicant is selected by an AD promotion board and the anticipated pin-on date is PRIOR TO separating into the redeferred program, then the applicant will separate in the new grade. He/she will carry this promotion through the length of re-deferment. However, the member **will not** meet a Reserve promotion board to be considered for the next higher grade. He/she will, however, be awarded day for day credit to be calculated upon re-accession onto AD at the completion of training.

If the applicant is selected by an AD promotion board after the JSGMESB and the anticipated pin-on is **AFTER** separating into the redeferred program, then the applicant will be eligible for promotion based on Reserve rules, in effect during time of the re-deferment. In the event the applicant is promoted in the Reserves, then he/she will carry this promotion upon re-accession to AD.

If the applicant is not considered by an AD promotion board prior to separating into the redeferred program then he/she **will not** meet a Reserve promotion board to be considered for the next higher grade. He/she will meet the first scheduled promotion board and be awarded day for day credit to be calculated upon re-accession onto AD at the completion of training.

Additionally, time spent in redeferred status does not count toward time in service for retirement.

You are encouraged to contact AFPC Officer Promotions through the myPers Total Force Service Center line at 800-525-0102 to discuss if you will be affected for a future promotion when entering redeferred training.

Civilian Sponsored Training

a. Applicants selected for civilian sponsored training will remain on AD, assigned under the command of the Air Force Institute of Technology (AFIT), and will retain their AF salary and AD benefits. As such, time spent in civilian sponsored status will count toward time in service, time in grade, and promotion just as if the member was at a military facility. AD physicians are prohibited from receiving a salary, stipend, or other monetary benefits from the civilian institution for his/her services as a resident or fellow. DoD and AF instructions prohibit off-duty employment/moonlighting while in GME training regardless of the civilian institution's policy.

b. Physicians applying to ACGME or AOA accredited civilian training programs prior to the JSGMESB do not need an acceptance letter as a part of their application. Individuals may negotiate with Program Directors prior to the JSGMESB but must make it clear to each Program Director that acceptance of any training offer is contingent upon official written notification by the AF following the JSGMESB. Applicants may seek programs in ACGME or AOA accredited civilian programs in the continental United States only. Final AF approval is contingent upon approval of the specific civilian training program including length and location of rotations away from the parent institution.

c. Applicants should provide a copy of the AFIT Training Agreement (TA), in advance, to the prospective civilian institution, to ensure they can agree to the terms and to prevent later delays in processing the assignment. Please direct any questions regarding the content of the TA to the AFIT POC listed on the first page of the agreement. If the applicant is selected to enter civilian sponsored training, the TA will need to be signed/executed between the AF and civilian institution. No TAs should be signed/executed prior to selection by the JSGMESB. The AFIT TA can be found on Physician Education website:

<https://kx.afms.mil/afphysicianeducation> **NOTE:** Programs under jurisdiction of LA County (LAC)/U of Southern Cal require a separate Training Affiliation contract (not the standard AFIT TA). This is a LAC requirement and is initiated by LAC. Legal coordination of this agreement can typically take weeks or months. Because of LAC's requirement, you will not be released for assignment until final disposition of this agreement is made. If you intend to apply to LAC programs, please keep in mind the timeframe in obtaining a signed LAC contract. Also, to avoid delays in assignment processing, ensure the appropriate individual has legal authority to sign contractual agreements. Often times, the Program Director may not have this legal authority.

d. Applicants selected for civilian sponsorship training and Phase 1 RAM selects starting in **2015** must provide an original letter of acceptance for that program by **10 April 2015**. Do not submit a letter of acceptance from more than one training facility. Letters of acceptance must be from the Program Director indicating the training

specialty as well as the start and graduation date of training. Additionally, sponsorship TAs will also be due by **10 April 2015** (RAMs are exempt from this TA requirement). The TA will be provided by Physician Education to the applicant to send to the training facility. If Physician Education does not have a letter of acceptance and sponsorship training agreement by **10 April 2015**, the offer to enter training may be withdrawn.

e. Applicants who have been offered and have accepted civilian sponsorship are encouraged to seek positions in programs which have affiliations with Veterans Administrations facilities.

f. Per AFI 36-2107, Table 1, civilian sponsored training (residency/fellowship) incurs a consecutive ADSC (i.e. served after a previous ADSC has been fulfilled rather than being served at the same time as a previous ADSC) for each year of training, with a minimum of two years ADSC. Therefore, individuals selected for only one year of civilian sponsored training will incur two years of consecutive ADSC. Two years sponsorship incurs two years ADSC and so forth. This civilian sponsored residency or fellowship ADSC is consecutive to the longest medical education/training ADSC the member has preexisting. In other words, you will begin fulfilling it AFTER your longest ADSC for medical education/training. Contrary to civilian sponsored training, residency training in an AD facility (AF, Navy, Army) incurs a year for year concurrent ADSC. As a reminder, no medical education/training ADSC may be fulfilled during GME training status. AD fellowship ADSCs are consecutive to any remaining GME ADSC one has (e.g. residency ADSC.)

g. In some instances, a civilian program may offer you a “Good faith letter” indicating that the program is willing to accept you if selected by the JSGMESB. This letter does not guarantee selection by the JSGMESB but does show you have an accepting program. You may upload the “Good Faith” letter into MODS as a part of your application.

Training in an Army or Navy Program

Training in an Army or Navy program requires funding from the AF. If the **2014** HPERB approved an Army or Navy facility as a training location, an applicant is able to request consideration for placement at that facility on page two of the JSGMESB application. If a specialty is soliciting civilian sponsorship as a training location and there is availability at an Army or Navy program, the applicant may request consideration for an Army or Navy program. However, the Army or Navy must be offering training in that specialty for the same year as approved by their HPERB-equivalent process. In situations where the HPERB did not approve an Army or Navy facility but did offer civilian sponsorship, it is the applicant’s responsibility to contact the respective Army or Navy Program Director to determine training availability and program capacity. If the HPERB did not approve placement in an Army or Navy program and if civilian sponsorship is not available to convert to an Army or Navy facility, then the applicant should not rank Army or Navy programs.

Again, applicants must rank all AD AF GME programs in which the HPERB has authorized training for the respective specialty in which applying (e.g. Internal Medicine applicants MUST rank SAUSHEC, Wright-Patterson/Wright State, Keesler and David Grant/UC Davis on page two of the DoD application for GME).

Residency in Aerospace Medicine (RAM) Applications

a. RAM is in two phases. Phase 1 is the Master’s in Public Health (MPH) or Master’s in Science (MS) year. Phase 2 consists of a two-year residency in Aerospace Medicine. Applicants accepted by the 2014 JSGMESB will attend Phase 2 at USAFSAM’s facilities at Wright Patterson AFB.

All RAM applicants must have a minimum of 2 years operational experience serving as a flight surgeon.

b. Applicants selected for RAM training are funded for the minimum time required to meet academic requirements at an accredited MPH or MS program. Distance learning programs are not approved as the classes must be attended in-residence. Applicants are authorized to start at the latest date that will allow for full

participation in the MPH/MS program, typically a summer or fall start. No exceptions will be made to start the MPH/MS program prior to **1 July 2014**.

c. It is highly recommended that all RAM applicants apply to at least two MPH or MS programs. Please refer to the MPH or MS school websites to determine the application deadlines as deadlines may occur prior to the JSGMESB results release. The ACGME requires the applicant to attend an accredited MPH or MS. A list of accredited MPH programs can be found at the Council on Education for Public Health's website: http://www.ceph.org/pg_accreditedschools_search.aspx. RAM applicants must submit the MPH/MS supplemental form provided in Section 3 regarding MPH school preference as a part of the application package and due NLT **14 September 2014**. There is now an opportunity to pursue the accredited Master's of Occupational Health from the University of Utah or the Master's of Aerospace Medicine at Wright State which both offer low cost tuition and meet RAM program requirements. Under no circumstances will applicants be authorized to start academic year programs prior to 1 July **2015**. Please review the following section for more guidance about high cost/low cost MPH programs.

d. If the applicant is interested in pursuing an MS rather than an MPH, please contact the USAFSAM RAM Program Director to ensure the desired program is accredited and will meet the board certification requirements of the American Board of Preventive Medicine (ABPM). If the applicant pursues an MPH the school must be accredited through the CEPH.

e. Selects for the RAM must provide an original letter of acceptance for the MPH/MS program NLT **10 April 2015**. Letters of acceptance must be from the school indicating the type of program as well as the start and graduation date for the program. If Physician Education does not have a letter of acceptance by **10 April 2015**, the offer to enter training may be withdrawn. Please do not send letters of MPH acceptances which do not list specific start AND graduation dates (most enrollment letters DO NOT indicate this information; therefore, you must request a letter from the school which has both dates). Physician Education must verify that you will be able to report to Phase 2, Wright Patterson AFB, by the required orientation (typically first week of June). The MPH/MS completion date should be no later than 1 June.

f. In the event a RAM selectee does not complete the entire RAM program, the obligation for the MPH year (or any portion of) will be a 3 year, consecutive obligation (IAW AFI 36-2107, Table 1.2, Rule 15 and DoDI 6000.13).

g. For more information on the RAM training, please visit the USAF School of Aerospace Medicine's Ram's Horn on the AFMS Knowledge Exchange.

MPH/MS associated with RAM

a. AFIT is able to fund only a limited number of high cost MPH/MS programs due to funding constraints. High cost is defined as the tuition/books/fees for the MPH/MS being \$30,000 or greater. Low cost is defined as tuition/books/fees being lower than \$30,000. If requesting selection of a high cost MPH year (i.e. Johns Hopkins, Harvard, Tulane, etc), the applicant is required to request a second, low cost program as well, should he/she not be selected for high cost by the JSGMESB.

b. Applicants are required to fill out and submit an MPH/MS supplemental form, included in Section 3, as part of the application package.

c. Residents are notified if they have been selected to attend a high cost vs a low cost program at the time they are notified of their selection to the RAM by the JSGMESB.

d. Applicants are not authorized to pay for any portion of the costs (i.e. pay the difference between high and low cost tuition).

e. **IMPORTANT:** Effective 31 Dec 2007, all MPH programs must be in compliance with the CEPH's new credit hour requirements. The CEPH has increased the required credit hours to 42 hours in order to obtain an MPH. Therefore, there are many MPH programs that cannot meet the Air Force's requirement of training under one year; in fact some MPH programs require extra courses in order to complete the MPH. The second year of the RAM begins in early June (around the 9th) and residents completing their MPH are required to start their second year on time. All MPH/MS requirements must be completed prior to reporting to USAFSAM to begin the second year. Applicants are not authorized to solicit acceptance from the programs which cannot meet all the AF requirements outlined above. When seeking a program, ensure you receive the proper information from your prospective school, as tuition/costs exceeding the \$30,000 or greater low cost cap (if selected for low-cost RAM), will not be authorized later due to misinformation on your initial cost estimate from the school.

Second Residencies

Physicians applying for second residencies must be aware of the following requirements:

- Applicants should be in the grade of Lt Col or below at the time of entry into training.
- Applicants must be board certified in their initial specialty.
- Applicants must have served a minimum of 5 years practice experience in their initial specialty before being considered for a second residency (or second fellowship).

Statement of Understanding

a. US Code 10, section 505 was amended 24 November 2003 to indicate that health professions officers will be retained on AD for the remainder of their Health Professions/Educational ADSC, regardless of being twice non-selected for promotion. **Exception: individuals who are retirement eligible.** Physicians holding a Health Professions/Educational ADSC will not be offered the opportunity to separate as a result of non-selection for promotion. This requirement is also outlined in the Statement of Understanding.

b. If selected by the 2014 JSGMESB, physicians will be required to work in a clinical capacity (in the specialty in which they trained) for at least two years after GME completion unless the AF/SG waives this requirement due to the needs of the AF mission.

Active Duty Service Commitments (ADSC)

ADSC is governed by US Code, Title 10 and AFI 36-2107 and varies depending on the length of sponsorship. An ADSC cannot be fulfilled while in GME training and is calculated based on completion dates.

Individuals selected for AD programs incur a year for year ADSC after the initial internship year. The initial internship year in an AD program is ADSC neutral. This GME ADSC is served concurrent (i.e. at the same time) with the ADSC for HPSP or USUHS.

Similar to AD programs, civilian sponsored GME programs incur a year for year ADSC though the initial internship year is not ADSC neutral. In addition, a civilian sponsored ADSC is served consecutive (i.e. in addition to the previous ADSC). See the table below for GME residency examples.

Training Length Completion Dates

Type of training:	Military Program*	Civilian Sponsored**
Length of program:	(5 years)	(5 years)
Start date:	1 Jul 2014	1 Jul 2014
Graduation date:	30 June 2019	30 June 2019

Previous ADSC	Completion of ADSC	Completion of ADSC
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USAFA + USUHS 12 year ADSC	30 June 2031	30 June 2036
ROTC + USUHS 11 year ADSC	30 June 2030	30 June 2035
USUHS 7 year ADSC	30 June 2026	30 June 2031

Notes:

*Military GME does not incur a longer ADSC than the previous ADSC though GME ADSC served concurrent to a previous ADSC

**Civilian sponsored GME residency training incurs an ADSC served consecutive to a previous ADSC

1. If incurring a longer ADSC is a consideration factor for you, **DO NOT** rank programs that will result in extending your current ADSC date.
2. Ranking programs indicates you are willing to incur a longer ADSC as indicated above for the double asterisk scenarios.
3. If you rank and are selected for a training program approved by the JSGMESB, you will not be allowed to switch to another program after the JSGMESB.

Selection as an Alternate

a. There are instances when an applicant is selected as an alternate by the JSGMESB. This means that if a primary selectee should decline training (or for some reason is unable to accept their selection) the alternate may be afforded the opportunity to accept/decline training.

b. In the event you are selected as an alternate, you will be given the opportunity to accept or decline alternate status. While activation may occur at any time, activations beyond February 2015 are unlikely, after all primaries have accepted the training offers. Physician Education will provide alternates with a written offer if an instance occurs that the primary selectee's status has changed.

c. Traditionally, if an applicant indicates a second specialty choice and is selected as an alternate for the first choice specialty, the application is not forwarded to the second choice specialty panel unless the applicant indicates otherwise in Section 5 on the "Second Choice Form."

Example: The applicant's first choice is General Surgery and second choice is Orthopedic Surgery. The applicant is selected as an alternate for General Surgery. The application will not be automatically transferred to the Orthopedic Surgery Panel for review since the applicant has a disposition from the JSGMESB (alternate for General Surgery).

1. If the applicant would rather be considered for Orthopedics (above example), then they should decline an alternate status in Section 5 of the "Second Choice Form". The application would then be transferred to the Orthopedic Surgery Panel for review.

Resignations

Physicians in training programs who want to change specialties must first resign from the current training program before applying for another GME program. According to AF Policy, students who resign will not be considered for further GME until they have completed a field assignment (at least two years at a CONUS assignment or one year remote tour, if applicable.) Please see Section 1 for further guidance on TOS and DEROS requirements. Air Staff Policy outlines that physicians who resign from a categorical program will be assigned to the field as a flight surgeon or general medical officer. Physicians are strongly encouraged to re-apply to a future JSGMESB.

Off-duty Employment/Moonlighting

In accordance with the DoD Policy and AFI 44-102, 1.9.4, applicants are not authorized to moonlight during GME training. Obligated AF officers are required to comply with all DoD and AF regulations. In some instances these requirements vary from non-obligated AF peers. Physician Education has the authority to remove you from training in the event a member engages in off-duty employment/moonlighting during GME.

“How Many Applications?” Question

Quite often Physician Education will receive the question “how many applicants, in my specific specialty, will be meeting this JSGMESB?” Physician Education does not release this information to applicants since the number is arbitrary in nature, and does not give a true sense of the applicant pool, number of waivers, eligibility, qualifications, quality of applications, etc. From an administrative standpoint, you are highly encouraged to make your application complete to ensure it is as competitive as possible. Also, make certain you meet all the administrative requirements as outlined in these application instructions and GME checklist.

Section 2: 2014 JSGMESB Application Instructions

Required Elements for the Active Duty GME Application

Please read all instructions before completing any part of the application. Applicants must comply with all requirements if they wish to be considered for GME selection.

All elements of the GME application to be uploaded into MODS must be typed, single sided (**no front/back documents**) on plain bond paper. No handwritten documents will be accepted by the JSGMESB. All documents with the **14 September 2014** deadline must be uploaded into MODS.

General information

- a. If an applicant attended any previous training under a different name, please include the name in parenthesis on the DoD application form and the Curriculum Vitae.
- b. Submitted application materials are for JSGMESB and Physician Education use only. These items are considered board sequestered and copies will not be furnished to the applicant or any third party requestor. Please plan accordingly if/when applying to or accepting offers from civilian institutions that requires a separate application process. Applicants are reminded they should keep a copy of their application package. Physician Education will not provide applicants, interviewers or other agencies a copy.
- c. Please ensure the original, signed application is uploaded into MODS on or before **14 September 2014**. **Please do not delay in submitting an application as MODS will be closed for submission of these documents after 14 September 2014.**
- d. **Faxed, emailed, mailed or hand-written DoD applications/supporting documents for the JSGMESB will not be accepted. Applications and ALL supporting documents must be uploaded into MODS with an original signature. There is no exception to this policy so, again, do not email, fax or mail any application item.**
- e. The required application documents not uploaded into MODS by **14 September 2014** will not be considered by the JSGMESB.
- f. This is a triservice GME selection board; all forms are standardized. When downloading from your email or the Physician Education website, do not change, alter, or deviate from the original format. Download and complete the application documents on your personal computer. Print the completed documents and upload the original, **signed** copies into MODS. Do not change the format of any forms or try to submit this application via email, fax or hard copy. Compliance with these instructions will expedite the processing of your application and afford the applicant the opportunity for selection for GME. All GME documents must be typed.

Contact Information

Applicants should notify Physician Education of any changes in contact information to ensure timely receipt of documents and application statuses. In order to expedite notifications and delivery, Physician Education sends electronic checklists to applicants regarding application status. The applicant is encouraged to include business (to include deployed) and personal email addresses with the application to ensure timely receipt of notifications.

DoD Two-Page Application for GME (DPANE Form 4117)

- a. The applicant will receive an automated email checklist each time there is an administration change to the application (i.e., documents received, etc) by Physician Education. Do not contact our office unless you have not received an automated email acknowledging receipt of your application document within two weeks of

uploading it into MODS.

b. Supporting documents must be typed and printed on one side only on plain white bond paper and uploaded into MODS. Hand-written application will not be accepted. Some documents will be completed within MODS but all other documents must be uploaded by the applicant.

c. The two-page DoD application for GME (DPANE Form 4117) must be completed within MODS. It cannot be found on any other website. This form is being used by ALL participating services – Air Force, Army and Navy. You will be able to complete this application within MODS but will need to use the form in this application to send to Program Directors/Consultants.

d. AD physicians will complete items 1-24. Most items are self-explanatory. Please note: Applicants in CONUS with less than two years on station or overseas applicants with a DEROS after 30 June 2015 may not be favorably considered for GME programs beginning 1 July 2015. Please see TOS/DEROS requirements in this application for more information. The following helpful hints are provided when completing your DoD Application for GME (DPANE Form 4117):

- You must include at least one valid email address in Block 10 and no more than three (one duty, one personal and one deployed if applicable). All correspondence will be sent directly to all addresses listed. If you deploy, keep in contact with your Physician Education Program Manager.
- Block 12 – You may list only one specialty choice. The second choice form must be completed if you wish to be considered for a second specialty.
- If your GPA or school ranking is unknown, indicate UNK. The panel reviews Dean's Letters/transcripts for awarding points.
- Block 16 – If you have **ONLY** completed a PGY1 internship, please list all your rotations. This does not apply if you are currently in residency or completed a residency or applying for fellowship.
- Block 17 – Do not forget to indicate Yes or No and indicate your board certification date.
- Block 18 – Your application must contain copies of USMLE or COMLEX Steps/Levels 1, 2, and 3.
- Block 23 – Applicants must rank ALL AD GME programs in which the HPERB has authorized training for the respective specialty in which you are applying. Please see additional notes below regarding Block 23.

e. Block 23: Applicants are able to list training location preferences (***up to 6 choices only***). In order to be considered for a particular HPERB approved training location, the applicants must indicate their preference(s) in Block 23. You are required to rank order all AD training locations, if offered (e.g. Internal Medicine applicants **MUST** rank SAUSHEC, Wright-Patterson/Wright State, Keesler and David Grant/UC Davis on page two of the DoD application for GME). Applicants are reminded that AF programs have priority and are filled before offering civilian sponsorship or re-deferment. Despite an applicant's preference for civilian training, the AF may require that they train in an AF program. Do not choose locations that are not approved by the HPERB even if they may be available with the Army or Navy. Exception: see above section titled, "**Training in an Army or Navy Program**".

f. Block 23: Note the difference between applying for Civilian Sponsored and Civilian Redeferred status:

1. Civilian Sponsored: If selected, you are on paid AD status while training in a civilian facility to which you have applied and been accepted. While sponsored, you will incur an additional ADSC which will be consecutive with any previously existing ADSCs. Your time in training does count towards retirement and for pay purposes, but you may not accept any salary from the training institution.

2. Civilian Redeferred: Redeferment in a civilian facility. While in deferred training, you will not incur any additional ADSC nor pay off any of your current ADSC. Your time in the program does not count towards retirement or for pay purposes. You receive your salary from your training institution.

g. Personal photos are not authorized with the GME application and should not be uploaded into MODS.

MPH Supplemental Form

(Applies to RAM applicants only)

Complete, sign, and date this page. A signature is mandatory.

Curriculum Vitae (CV)

The applicant is required to follow the GME format exactly. This application is meeting a triservice board and must be standardized. Please do not modify (i.e. change fonts/pitch, remove dividing lines, re-arrange sections, etc.) or your CV will be returned for corrections. **DO NOT DELETE ANY SECTIONS**, to include Spouse section (regardless of marital status). If a section does not apply, simply annotate "N/A". The CV located in Section 3. You may, however, create more space within a specific block if need be (e.g. adding lines for more military assignments).

Current, Unrestricted Medical License (see Table 1) Please do not upload into MODS a copy of the licensing certificate unless the expiration date is listed. Internet verifications or a copy of a wallet card is preferred.

Table 1 Applicants must submit results of ALL attempts to pass any USMLE/COMLEX Step/Level exam

	USMLE/COMLEX STEP/LEVEL 1	USMLE/COMLEX STEP/LEVEL 2	USMLE/COMLEX STEP/LEVEL 3	UNRESTRICTED MEDICAL LICENSE
Intern PGY1	Yes	Yes	Test NLT 15 Mar 2015 Results NLT 30 Apr 2015	No
PGY2 resident	Yes	Yes	Yes (see Note 1)	Required by end of PGY2 year
PGY3 resident and above	Yes	Yes	Yes (see Note 1)	Yes (see Note 2)
Staff physician	Yes	Yes	Yes	Yes (see Note 3)

* Note 1: If the applicant has failed Step/Level 3 and not subsequently passed that Step/Level, the applicant is ineligible to apply.

* Note 2: PGY3s and above that do not possess a valid, unrestricted medical license will be ineligible to meet the JSGMESB.

* Note 3: Staff physicians that do not possess a valid, unrestricted medical license will be ineligible to meet the JSGMESB.

USMLE Step 1/COMLEX Level 1 Upload into MODS a copy of your official transcripts as a part of your JSGMESB application package (Table 1).

USMLE Step 2/COMLEX Level 2 Upload into MODS copy of your official transcripts as a part of your JSGMESB application package (Table 1).

USMLE Step 3/COMLEX Level 3

Upload into MODS a copy of your official transcripts as a part of your JSGMESB application package (Table 1). Current residents in their second post graduate year (PGY2) of residency must have Step 3 results as a part of their application package or they will be ineligible to meet the JSGMESB.

Step/Level 3 Intention Form, if applicable

Current interns must have scheduled USMLE Step 3/COMLEX Level 3 prior to the submission of their JSGMESB application. This date must be entered on the **Step/Level 3 Intention Form** (template included in Section 3). Step/Level 3 must be taken prior to **15 Mar 2014**. If selected, the GME training offer and approval to enter GME is contingent on obtaining passing results NLT **30 Apr 2014**. Individuals will not be released for GME assignment without passing Step/Level 3 results. You must plan accordingly as there are no exceptions to this requirement. Once your scores are received, mail a copy to Physician Education.

Medical School Performance Evaluation (formerly known as Dean's Letter)

The official Medical Student Performance Evaluation (MSPE) must be uploaded into MODS by the applicant. Applicants should ensure that a MSPE is uploaded into MODS for inclusion in the application. This document is extremely important to the JSGMESB application. If you have previously applied to the JSGMESB, you will still be required to submit a copy of the Dean's Letter as a part of your application package. Members are encouraged to maintain a copy for their personal files for future use and future JSGMESB applications.

Note: If a U.S./foreign medical school graduate is unable to obtain a Medical School Performance Evaluation due to extenuating circumstances, the applicant must write a brief, signed memorandum explaining the circumstances. This memorandum should be uploaded into MODS in place of the Medical School Performance Evaluation. Please understand your Medical School Performance Evaluation is used for scoring purposes and the absence of this document in your application could adversely affect your score.

Official Copy of Medical School Transcript

The official transcript must be uploaded into MODS by the applicant. Members are responsible for requesting a copy of their transcripts to include in their JSGMESB application package. If you have previously applied to the JSGMESB, you will still be required to submit a copy of the official medical school transcript as a part of your application package. Members are encouraged to maintain a copy of the official final medical school transcript for their personal files for future use and future JSGMESB applications. It is the applicant's responsibility to make sure the MSPE and medical school transcript have been uploaded into MODS.

Commander's Letter of Recommendation

This is a requirement for staff physicians who are not currently in training and is in addition to the two "personal" letters of recommendation. The Commander's Recommendation Letter must be written by the Commander who holds UCMJ authority over you at the time of application. Flight Commanders who hold UCMJ authority and are on G-Series Orders may write the letter in the absence of the Squadron Commander. The Commander's letter weighs heavily at the JSGMESB and is an opportunity for the Commander to make specific recommendations about the applicant. The Commander's letter should include information about leadership potential, officership, and potential for success. This letter is also the forum for the Commander to address any pending UCMJ actions, adverse credentialing actions, or UIF actions. Only the Commander, who holds UCMJ authority at the time of application, can attest this information and therefore sign the letter. However, collaboration with another Commander/individual is not uncommon. Ultimately, the Commander's recommendation for further GME is one of the critical deciding factors for the JSGMESB President's approval for further training.

The Group Commander must endorse all Commander Recommendation Letters.

a. If the applicant is assigned to a Medical Treatment Facility

The Commander's Recommendation Letter is typically from the applicant's Squadron Commander with a required endorsement by the medical Group Commander of the facility where the applicant is credentialed. If neither the Squadron Commander nor Group Commander are physicians, then a third endorsement from the

SGH is also required (see Table 2). If the applicant is the SGH and requires the 3rd endorsement from an MC Officer, the MAJCOM SGH/SGO is appropriate.

There is no required format for an “endorsement”. If your Commander’s Letter requires Group Commander and/or SGH endorsement, it may be on the same Commander’s Letter, a separate page “Concur/Non-concur” block, or if the endorser chooses to elaborate on a separate page, he/she may do so, and the applicant can upload this into MODS along with the Commander’s Letter as the required endorsement. All endorsements must be uploaded into MODS by the applicant together as a part of the JSGMESB package.

Referring to Table 2, the suggested order of the signatures is: Squadron Commander and medical Group Commander or line Squadron Commander, SGH, and medical Group Commander.

b. If the applicant works in a non-medical organization (e.g. fighter squadron, detachment, etc)
 The first endorsement will be by the Squadron Commander (or equivalent) of the organization the applicant is assigned to with required endorsement from the medical Group Commander of the hospital where the applicant is credentialed. If neither the Squadron Commander nor the Group Commander are physicians, then a third endorsement from the SGH is also required in addition to the other two signatures (see Table 2). Referring to Table 2, the suggested order of the signatures is: line Squadron Commander and medical Group Commander or Squadron Commander, SGH, and medical Group Commander.

There is no required format for an “Endorsement”. If your Commander’s Letter requires Group Commander and/or SGH Endorsement, it may be on the same Commander’s Letter, a separate page “Concur/Non-concur” block, or if the endorser chooses to elaborate on a separate page, he/she may do so. All endorsements must be uploaded into MODS together as a part of the JSGMESB package.

For those bases who no longer have a Medical Group due to BRAC, the credentialing process and the privileging authority for our AF providers assigned to joint bases rests with the Medical Treatment Facility Commander of the joint base. For example, AF providers assigned at McChord are credentialed and privileged by Madigan. The letter must be endorsed by the medical Group Commander equivalent.

Deployed members must obtain the Commander’s Recommendation Letter from their home unit’s Squadron and Group Commander or, if applicable, the home station Medical Group SGH.

Table 2

	Squadron Commander in Medical Corps	Squadron Commander NOT in Medical Corps
Group Commander in Medical Corps	Do not need SGH endorsement	Do not need SGH endorsement
Group Commander NOT in Medical Corps	Do not need SGH Endorsement	Requires SGH endorsement <u>in addition to</u> Squadron and Group Commander signatures

DEROS Letter of Intention

(applicable only if a DEROS waiver will be required for applicants stationed overseas)
 Once the JSGMESB application has been uploaded into MODS, Physician Education will print a Personnel Brief which will identify the applicant’s DEROS. If your DEROS is after your projected departure date for GME training (typically end of May-beginning of June), a Letter of Intention will be required. AD programs usually start orientation around 6-9 Jun. Rederferred training will require a separation date one day prior to training and civilian sponsored report dates are usually one week prior to training/orientation starting. It is acceptable for the overseas commander to address the intentions in their Commander’s Recommendation Letter or in a separate Letter of Intention. They should address their ability to support a DEROS waiver that will

correspond with GME training if the applicant is selected. The Commander **MUST** indicate the earliest release date they can support. The Commander must indicate that he/she has coordinated with the MAJCOM/SG. The Letter of Intention template/guidance is included in Section 3. It is the applicant's responsibility to upload this letter into MODS.

Two Personal Letters of Recommendation

Letters must be original with original signature written and dated within 6 months of the application and limited to one page (to include signature block). Letters from previous applications will not be used. Carefully consider who will submit a letter of recommendation. If the applicant uploads more than two letters into MODS, the extra letter(s) will be automatically discarded. Do not request more than two individuals to write letters and later request to "switch out" letters. Both letters of recommendation must be uploaded into MODS by the applicant and should not be submitted under separate cover. Thus, you will need to request the letters be sent to you so that you can upload the letters into MODS.

The author of the personal letter of recommendation must NOT be in any of these roles:

1. Current or previous Program Director or Associate Program Director from a program in which you previously trained
2. Sitting Program Director or Associate Program Director in the specialty in which you are applying
3. Sitting AF Consultant in the specialty you are applying
4. Any member of the JSGMESB Management Level Review or Board President's panel

If a personal letter of recommendation is uploaded into MODS as a part of your application package by any of the above individuals, it will not be accepted. There is no standard format for the personal letter of recommendation. The author may address the letter to the JSGMESB.

Last Five Operational Performance Reports (OPR)/Training Reports (TR)

This applies to all AD applicants (including current residents). Applicants must upload into MODS up to the last five OPRs (AF Form 707A or 707B) and/or TRs (AF Form 475) written while a physician was on AD (in or out of GME). Annually, officers on AD receive a report, either an OPR or TR. OPRs are an annual requirement when on staff and TRs are an annual requirement when in training on AD (including civilian sponsored status).

a. If a physician has been on AD for over 5 years, submit only reports that closed out in 2010, 2011, 2012, 2013 and 2014 (only if finalized before 14 September 2014). Additional reports will be discarded. Physicians who have been on AD less than a year will most likely not have an OPR or TR available.

b. Do not upload into MODS - Copies of TRs from Officer Training School or Commissioned Officer training, copies of AF Form 494s (Academic/Clinical Evaluation Reports) or reports from prior AD service (unless serving as a physician in that service.)

c. USUHS graduates and residents/fellows in sponsored training have annual TRs.

d. Contents of your master officer personnel record (OPR/TRs) are available for download from ARMS. Log on to <https://w20.afpc.randolph.af.mil/afpcsecurenet20/PKI/MainMenu1.aspx> to access ARMS. If having difficulties (i.e., ARMS button not available, unable to view documents, etc) send an email to afpc.dpsomp@randolph.af.mil with your name and as much information about the problem. If you are experiencing difficulties with your **AFPC Secure** account using the CAC, you should contact your local system administrator or the Personnel System Operations Control Center (PSOCC) at DSN 665-5004, commercial (800) 616-3775 (options 1,1,4 for military and 2, 4 for civilians) or email psocc.sd@randolph.af.mil.

e. If unable to access ARMS, visit your local Military Personnel Section (MPS) or Unit Commander's Support Staff (CSS) for guidance on obtaining copies of OPRs/TRs from your master personnel records.

f. If the applicant has problems obtaining copies of OPRs/TRs from ARMS or MPS or CSS:

- USUHS may have copies of TRs that cover medical school attendance at USUHS.
- Residency/fellowship Program Coordinators may have copies of TRs if the applicant trained in an AF facility. However, use this option as last resort, to preclude additional work on the Program Coordinator.
- AFIT may have copies of TRs if the applicant is in civilian sponsorship. You may contact AFIT at (937) 255-2259 ext 3012 or DSN 785-2259 ext 3012 or 800-543-3577.

Personal Essay

Required from all applicants and must be no more than 1 page (**double spaced, Times New Roman, 10 or 12 font size, and 1 inch margins**). Ensure your name is included on the essay. The essay must be current.

Physician Education cannot use essays submitted with previous JSGMESB applications. The board is greatly influenced by this essay. Using a four paragraph concept, outline personal/professional plans and goals, why you want to train in a particular specialty, and what strengths you bring to that specialty. If you have any extenuating circumstances for the JSGMESB to consider, communicate these in your last paragraph. Examples of extenuating circumstances include, but are not limited to, marriage to a member of the AF or another service; a spouse in a training program not affiliated with the AF (a statement from your spouse's training program is required to substantiate their presence in the program); a parent with a terminal illness (medical documentation is required from the treating physician with the diagnosis and prognosis); and a family member enrolled in the EFMP/Special Needs program (documentation from the EFMP office required). You should also mention these circumstances during your program interviews and also email your Program Manager to bring their attention to your extenuating circumstance. Your personal essay is an opportunity to communicate with the JSGMESB- please use this to your advantage! ***Important: If you are listing redeferred (unfunded) training as your first choice, when there are AD locations authorized by the HPERB, you must indicate your reasons for having redeferred as your first choice. If there are extenuating circumstances, you must provide source documentation as mentioned above in the examples.***

Second Choice Form

This form must be filled out by all applicants and requires the applicant's signature. Second choice refers to specialty choice only (e.g. your first choice is ophthalmology but, if not selected, your second choice is general surgery). The second choice start date and training preferences are indicated on the second choice form. If you list a second choice for specialty, please ensure you also fill out items 3-5 on the second choice form. If you do not have a second choice for a specialty, just check item 1 on the form ("I do NOT have a second choice...") and print/sign your name at the bottom of the form. Completion is mandatory.

Fitness Statement

The Air Force fitness program was revised on 1 January 2010. AD members are required to test twice per year unless a 90 or higher score ("Excellent") is achieved. Please follow current fitness guidelines IAW AFI 36-2905 and your local procedures. Visit your Unit Fitness Program Manager if you have questions on fitness testing. The JSGMESB Fitness Statement must be uploaded into MODS as a part of your application-do not submit a copy of your fitness scorecard.

Applicants in all fitness categories may apply for GME. The JSGMESB President will review all "unsatisfactory" fitness applicants and approve selection for GME on a case by case basis. All AD applicants with a "satisfactory" or "excellent" score are required to upload into MODS a current Fitness Statement (provided in section 3) which is signed by either the Unit Fitness Monitor or your Squadron or Group Commander indicating your latest test date and test score. Applicants must be current through the end of this year. If your next test expires before the end of the year, you must retest so that you are submitting a current

score as a part of your application package prior to the 14 September 2014 JSGMESB application deadline. For individuals who are identified as “unsatisfactory” (score < 75) or failed one or more component(s) of the test, the Squadron or Group Commander (not the Unit Fitness Monitor) must complete the letter and make his/her specific recommendation for GME consideration. Please note: if selected for GME and your fitness status changes from “unsatisfactory” to “satisfactory or excellent” or from “satisfactory or excellent” to “unsatisfactory” prior to entering training, Physician Education must be notified with an updated Fitness Statement.

Applicants currently training in Civilian Sponsored status will test through their assigned ROTC detachment. If you are unsure how to meet the fitness testing requirement, contact your Program Manager at AFIT at 800-543-3490 ext 3012/3019. If an applicant does not pass (“unsatisfactory” score) the fitness test, the Fitness Statement form must be filled out by AFIT/CIMJ, provided back to the applicant and uploaded into MODS. Otherwise, the Fitness Statement form may be filled out by the ROTC detachment Unit Fitness Monitor. It is the applicant’s responsibility to upload all documents into MODS.

Statement of Understanding

Read, sign, and date this page. A signature is mandatory.

Education Summary

This form has been omitted for AD-applications. If it appears on the automated GME Checklist email you receive from Physician Education, please disregard it. This form is only required for 4th year medical students.

Current Program Director Recommendation Form

(applicable only if currently in training)

Applicants presently in a GME training program must request their current Program Director to submit the DoD Program Director Recommendation Form, not a letter, to include the dates of training and an evaluation of performance. This form is found in Section 3 of these instructions. For individuals applying for fellowship training that are currently in a pre-select specialty (e.g. Urology, Radiology, Anesthesia, Neurology, Ophthalmology, etc) that required a separate internship year, then a recommendation will also be required from the Program Director from the internship year. The Program Director Recommendation Form(s) is/are uploaded directly from the Program Director into MODS (mail or fax-not via email). This form MUST be typed. Handwritten forms will be returned. Please note, do not submit a letter of recommendation from the Program Director in addition to or in lieu of the Program Director Recommendation Form. This form must be current, and include ALL periods of training.

a. Applicants *who are currently in an AF training program*: Physician Education will provide the required blank form to the current AF Program Directors. You **MUST** request this form be completed and uploaded into MODS by the Program Director.

b. Applicants *who are currently training in a civilian program*: Please email the Program Director Recommendation Form to your Program Director to complete and have them give it back to you so that you can upload it into MODS. This form is located in section 3 (Application Documents) toward the end of these instructions. This form MUST be typed. Handwritten forms will be returned.

Previous Program Director Recommendation Form

(applicable if previously in training)

Applicants previously enrolled in any GME program (military or civilian) must request any AND all previous Program Director(s), including fellowships, to submit a DoD Program Director Recommendation Form. For example, if an individual previously trained in Family Medicine, a recommendation form will be needed from that program. For individuals that trained in a specialty that had a separate internship year (e.g. Urology,

Radiology, Anesthesia, Neurology, Ophthalmology, etc), then a recommendation will be needed from each Program Director (e.g. the Transitional Year Program Director and the Ophthalmology Program Director).

It is very common that the previous Program Director is no longer at the training institution (AD or civilian). If this applies, please have the current Program Director of that program fill out the form based on a review of your training file which is kept there. They are familiar with completing various training verification forms. The ACGME requires training files be maintained for 50 years. If the applicant is unable to locate the new Program Director, he/she should request a recommendation from the Director of Medical Education at the facility where the training was conducted. This document is required whether or not the training program was completed (i.e. if you resigned or were terminated) and must address the inclusive dates of training and an evaluation of performance. This form is submitted back to the applicant and it is the applicant's responsibility to upload this form into MODS. This form MUST be typed. Handwritten forms will be returned. It is the applicant's responsibility to clearly communicate that the form must be typed. Please note, do not submit a personal letter of recommendation from the Program Director in addition to or in lieu of the Program Director Recommendation Form.

a. Applicants *who trained in an AF training program*: Physician Education will provide the required blank form to the current AF Program Directors. The applicant is required to make contact with the current Program Director and request the form be filled out and uploaded into MODS.

b. Applicants *who trained in a civilian program*: If the automated "GME Checklist" email you receive from Physician Education verifying receipt of your application package reports we still need your Program Director Recommendation form, please email the Program Director Recommendation Form to your Program Director to complete. The Program Director should forward the signed form directly back to you so that you can upload it into MODS. This form is located in Section 3 (Application Documents) toward the end of these instructions. This form **MUST** be typed.

Program Director/Consultant Interview Sheets

a. This form is not included with this package. It will be forwarded to AF Program Directors/Consultants. The intent of the interview sheet is for Program Directors to assess the applicant's qualifications for selection in the requested specialty. Completion of this form is mandatory for all JSGMESB applicants. Lack of an interview will likely result in non-selection of the specialty regardless of the applicant pool. Applicants are required to schedule a personal or telephonic interview with the Program Director at the applicant's first AD training location choice. In cases where an applicant is applying for an HPERB approved specialty for which there is no AF Program, the applicant will be required to interview with the AF specialty consultant. This interview requirement includes applicants requesting Civilian Sponsored or Redeferred status as their first choice. However, applicants may interview with multiple programs and the requirement for the interview form will be met when Physician Education receives any interview form from any of the AF locations you interview.

1. Applicants must list every AD location in which the HPERB has authorized positions for that specialty. This is a requirement even if the applicant only desires civilian sponsorship or redeferred training. The JSGMESB application will be returned if this requirement is not met.

2. Applicants applying for an HPERB approved Army/Navy Program (as a first location preference), will be required to interview with the respective Program Director from that service.

b. Program Directors/Consultants are not provided a list of applicants to their programs until **1 October**. Therefore, it is the applicant's responsibility to make initial contact with the appropriate Program Director (or Consultant when appropriate) to request an interview. It is highly recommended to schedule this interview as soon as possible. You must interview no later than **10 October 2014** to ensure that the Interview Sheet can be

completed and uploaded into MODS by the Program Director/Consultant NLT **15 October 2014**.

c. Applicants are required to send a copy of their two-page DoD Application (in Section 3 “DPANE Form 4117”) and CV to each AF Program Director/Consultant in the specialty for which he/she is applying. Providing the 2-page DOD application and CV is extremely important, even if applicants desire to train in a deferred/civilian location. Keep in mind; the Program Directors/Consultants are the JSGMESB members who will be selecting individuals for specialty training and location. **Note: No additional documentation other than these two documents may be provided to (or requested by) Program Directors/Consultants. Do not send other application documents to them, only the two required items. Program Directors/Consultants are aware of this JSGMESB restriction.**

d. Contact information for the Program Directors/Consultants is available at: <https://kx.afms.mil/afphysicianeducation> Please contact and request to speak with the Program Director or Consultant. If the applicant has made several attempts to contact the appropriate person and is having difficulty, please contact Physician Education for assistance.

e. Physician Education has received questions regarding applicants’ eligibility for leave or permissive TDY in order to travel to/from GME interviews. The applicant’s Squadron Commander has the ultimate approval authority for permissive TDY requests. Please refer to AFI 36-3003, Table 7 for further guidance. While Table 7 does not specifically address GME interviews, rule 17 is the closest fit. Please review 12.8 below Table 7 to ensure your situation does not fall under “PTDY warranting disapproval.”

Section 3: JSGMESB Application Documents

Note: You must upload into MODS the JSGMESB application with all supporting documents as soon as possible but no later than the deadline of **14 September**. Once the documents are uploaded into MODS, your Physician Education Program Manager can begin processing your application and email a GME checklist to you annotating receipt of your documents. You must complete all the required forms in this section.

1. Remember to print all application documents on one side only. Documents printed on front/back or handwritten will be returned.
2. Ensure your name is listed in the box at the top of the second page of the DoD Application for GME (DPANE Form 4117).
3. Please do not alter or delete sections of the CV. All sections are required, even if it does not apply to you. If a section, such as military spouse, does not apply, please enter N/A.

DEPARTMENT OF DEFENSE APPLICATION FOR GRADUATE MEDICAL EDUCATION (DPANE Form 4117)

THIS FORM IS AFFECTED BY THE PRIVACY ACT OF 1974

1. AUTHORITY: 10 USC 3012.
2. PRINCIPAL PURPOSE(S): To compile information necessary to evaluate an application for military graduate medical education (GME) training.
3. ROUTINE USES: To evaluate application for professional training in military and civilian facilities (**Medical Corps officers only**).
4. MANDATORY OR VOLUNTARY DISCLOSURE: Disclosure of requested information is voluntary, however, without it, consideration for GME cannot be accomplished and GME may not be assured.

1. NAME (Last, First, MI)	2. GRADE	3. Last Four of SSN	4. CURRENT SPECIALTY	5. SERVICE
				<input checked="" type="checkbox"/> Air Force <input type="checkbox"/> Army <input type="checkbox"/> Navy

6. HOME/APO ADDRESS (ZIP+4)	7a. HOME PHONE	8. COMPLETE DUTY ADDRESS	9. DUTY PHONE
	(include area code)		COMM:
			DSN:
	7b. CELL PHONE		Pager:
			Fax:

10. EMAIL (Max 3 – Include Duty/Personal/Deployed if applicable):

11. CURRENT STATUS	12. SPECIALTY OR SUBSPECIALTY REQUESTED
<input type="checkbox"/> MEDICAL STUDENT <input type="checkbox"/> HPSP <input type="checkbox"/> ROTC/Educational Delay <input type="checkbox"/> ACTIVE DUTY PGY1 (INTERN) <input type="checkbox"/> ACTIVE DUTY RESIDENT <input type="checkbox"/> ACTIVE DUTY FELLOW <input type="checkbox"/> ACTIVE DUTY FIELD/OPERATIONAL STAFF <input type="checkbox"/> DEFERRED/REDEF/FAP (Until _____ Month/Year) <input type="checkbox"/> OTHER (Specify) _____	Choice (ONLY one):
	13. START DATE REQUESTED 14. PROGRAM LENGTH () YEAR (S)

15. TRAINING

a. Undergraduate School		GRADUATION YEAR
Major		
Approximate GPA	Honors	
b. Medical School Name		GRADUATION YEAR
Approximate GPA	Class Ranking _____ of _____ School Does Not Rank _____	
Academic Honors		
c. PGY1/Specialty	Location	GRADUATION YEAR
d. Residency/Specialty	Location	GRADUATION YEAR
e. Fellowship/Specialty	Location	GRADUATION YEAR

16. LIST OF PGY1 ROTATIONS AND TIME SPENT IN EACH: (Fill out only if you are applying for a residency and did not complete a categorical PGY1 in that specialty. Complete this section if you have ONLY completed an internship year. Not to be completed if applying for a fellowship)

17. SPECIALTY BOARD CERTIFICATION ☐ YES ☐ NO If yes, indicate specialty & certification date:

18. MEDICAL LICENSING EXAMINATIONS (Copies of Steps/Levels 1-3 must be submitted with this application)

	Check One	Check One
Step/Level 1	<input type="checkbox"/> Passed <input type="checkbox"/> Failed Year taken _____ <input type="checkbox"/> Not Taken	FLEX <input type="checkbox"/> NBME/USMLE <input type="checkbox"/> NBOME/COMLEX <input type="checkbox"/>
Step/Level 2	<input type="checkbox"/> Passed <input type="checkbox"/> Failed Year taken _____ <input type="checkbox"/> Not Taken	
Step/Level 3	<input type="checkbox"/> Passed <input type="checkbox"/> Failed Year taken _____ <input type="checkbox"/> Not Taken	

19. ECFMG (If applicable) Certificate #

Date

NAME (Last, First, MI)		
20. POST-PGY1 EXPERIENCE (Last three (3) assignments only)		
Duty Station	Duty Title	Dates (From – To)
21. Participation in federally funded programs (check all that apply): <input type="checkbox"/> HPSP <input type="checkbox"/> ROTC/Educational delay <input type="checkbox"/> USUHS <input type="checkbox"/> FAP <input type="checkbox"/> Military Academy <input type="checkbox"/> Direct Accession		
22. I possess a current, valid and unrestricted medical license <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, you must submit a copy of license including the expiration date with this application.)		
23. TRAINING PREFERENCES Rank order your preferences by listing 1, 2, 3, etc. (Maximum of 6 preferences)		
AIR FORCE (Must rank all HPERB locations for your specialty)		ARMY
David Grant Medical Center, Travis AFB, CA		Eisenhower Army Medical Center, Fort Gordon, GA
USAF Regional Hospital, Eglin AFB, FL		Madigan Army Medical Center, Tacoma, WA
Erhling Bergquist Clinic, Offutt AFB/University of Nebraska, Omaha NE		Tripler Army Medical Center, Honolulu, HI
Keesler Medical Center, Keesler AFB, MS		
Mike O'Callaghan Federal Hospital, Nellis AFB, NV		
NCC- The National Capital Consortium (Walter Reed National Military Medical Center), Bethesda, MD Includes NCC, Fort Belvoir Community Hospital and USUHS		William Beaumont Army Medical Center, El Paso, TX
SAUSHEC (Wilford Hall Ambulatory Surgical Center/San Antonio Military Medical Center)		
Scott AFB/St. Louis School of Medicine (Belleville) Program, Belleville, IL		Womack Army Medical Center, Fort Bragg, NC
Wright-Patterson Medical Center/Wright State Univ, Dayton, OH		Darnall Army Community Hospital, Fort Hood, TX
USAFSAM (RAM – Wright Patterson AFB, OH / Hyperbaric - Lackland AFB, TX)		Martin Army Community Hospital, Fort Benning, GA
Civilian Sponsored		Keller Army Community Hospital, West Point, NY
Civilian Deferred/Redeferred (Non-funded); rank even if not offered on HPERB if you are interested		
NAVY		OTHER
Naval Medical Center, Portsmouth, VA		Uniformed Services University of the Health Sciences (Non-Clinical)
Naval Medical Center, San Diego, CA		Walter Reed Army Institute of Research
Naval Hospital Bremerton, WA		
Naval Hospital, Camp Lejeune, NC		
Naval Hospital, Camp Pendleton, CA		
Naval Hospital, Jacksonville, FL		
Naval Hospital, Pensacola, FL		
Naval Aerospace Medical Institute, Pensacola, FL		
24. I understand that the GME training received is directed toward board certification. I am familiar with the training requirements for board certification in the specialty for which I have applied. It is understood that I must enter a program that is accredited and listed in good standing in the most current GME Directory published by the American Medical Association or if applicable (generally PGY1 level of GME) by the most current Yearbook and Directory published by the American Osteopathic Association. I understand that I must also meet the requirements to sit for the certification examination by the respective specialty board which is recognized by the American Board of Medical Specialties. For those subspecialties, which do not lead to board certification nor possess accreditation status, training must be received in a program approved by the appropriate specialty society. I understand that my service obligation following GME training will be computed in accordance with applicable Service Regulations and DoD Directives and that I will be made aware of my exact obligation prior to entering GME training. I acknowledge that I understand the contents of this application and I affirm that the information given in this application is true and complete to the best of my knowledge. I am aware that I must submit all supporting documents required by the military Service for which I am assigned for this application to be complete.		
APPLICANT SIGNATURE :		DATE:

**2014 Joint Service Graduate Medical Education Application
Master of Public Health (MPH) or Master of Science (MS) Supplemental Form**

APPLICANT NAME:

MPH/MS Phase 1 (Applicant Choice)

MPH/MS Degree

I **have** / **have not** (circle one) completed an MPH/MS year in the past.

If yes, type of degree: _____ Date completed: _____

Numerically rank your preference by circling the appropriate answer in both questions below. (Circle FIRST or SECOND choice) **NOTE:** Applicants are not required to rank a high cost option, however applicants that rank high cost, must have at least one low cost application submitted for tuition/fees under \$30,000.

- 1.) High Cost MPH/MS is my **FIRST** / **SECOND** choice (circle one) or N/A _____
- 2.) Low Cost MPH/MS is my **FIRST** / **SECOND** choice (circle one)

High Cost	High Cost Tuition and fees:	Low Cost	Low Cost Tuition and fees:
1 st Choice Location: _____	_____	1 st Choice Location: _____	_____
2 nd Choice Location _____	_____	2 nd Choice Location: _____	_____

Applicant Statement of Understanding

I understand that if I do not complete the entire residency/fellowship training program for any reason, I will incur a 3 year consecutive active duty service commitment (ADSC) for the MPH/MS sponsorship

Signature _____ Date: _____

Curriculum Vitae
MM/DD/YYYY**PERSONAL DATA**

Full Name:
Corps: Medical

Grade:
Service: Air Force

Current Home Address:

Home Phone:
Cell Phone:

Email (personal):

Duty Assignment Address:

Phone:

DSN:
Commercial:
Pager:

Ext:

Email (duty):

Birth Date:
State of Birth:

City of Birth:
Country of Birth:

Spouse: (Complete the following only if your spouse is active duty; otherwise indicate N/A)

Full Name:
Service:
Duty Assignment:

Corps:
Other:

EDUCATION:

Undergraduate:
Medical School:
Other Postgraduate:

Degree:
School:
Graduation Date:

Degree:
School:
Graduation Date:

Military Training Courses:

Other Military Courses

PROFESSIONAL TRAINING AND EXPERIENCE:

PGY1 Specialty:
Location:

Completion Date:

Residency Specialty:
Location:

Completion Date:

Fellowship Specialty:
Location:

Completion Date:

PRIOR MILITARY SERVICE (Complete this section if you have had prior active duty military service, to include a staff physician assignment within another branch of service or prior service before attending medical school. List in chronological order starting with most recent service)

Type of Service:
Rank:
Corps (commissioned Service only):
Description of Service (describe the type of duties performed):

Dates of Service: TO
_____._____._____._____._____._____._____._____._____._____.

Type of Service:
Rank:
Corps (commissioned Service only):
Description of Service (describe the type of duties performed):

Dates of Service: TO
_____._____._____._____._____._____._____._____._____._____.

Type of Service:
Rank:
Corps (commissioned Service only):
Description of Service (describe the type of duties performed):

Dates of Service: TO
_____._____._____._____._____._____._____._____._____._____.

CIVILIAN WORK HISTORY/MILITARY ASSIGNMENT HISTORY

(Chronological order starting with current assignment):

Duty Title:

Duty Location:

Dates of Assignment: TO Present

_____._____._____._____._____._____._____._____._____._____.
Duty Title:

Duty Location:

Dates of Assignment: TO

_____._____._____._____._____._____._____._____._____._____.
Duty Title:

Duty Location:

Dates of Assignment: TO

_____._____._____._____._____._____._____._____._____._____.
Duty Title:

Duty Location:

Dates of Assignment: TO

_____._____._____._____._____._____._____._____._____._____.
Duty Title:

Duty Location:

Dates of Assignment: TO

_____._____._____._____._____._____._____._____._____._____.

LICENSURE AND SPECIALTY CERTIFICATION:

Current Unrestricted State License:

I possess a current unrestricted license: Yes No

License Number: State: Expiration Date:

Board Certification: Board Certified: Yes No

Specialty:

Certification Date (if pending, indicate status):

HONORS AND RECOGNITION/COMMUNITY SERVICE:

Undergraduate:

Medical:

Military:

ACADEMIC APPOINTMENTS:

PROFESSIONAL SOCIETIES: (must indicate in what capacity completed; i.e. medical student, intern/resident, house staff officer or field staff officer)

PUBLICATIONS/RESEARCH:

(must indicate in what capacity completed; i.e. medical student, intern/resident, house staff officer or field staff officer) For publications, list all authors and use standard format as would be seen in a medical journal.

Step/Level 3 Intention Form

(Required for current PGY1 applicants who have not taken/received Step/Level 3 scores)

1. Physicians who are currently completing their PGY1 year must have scheduled Step/Level 3 prior to the 2014 JSGMESB convening. Step/Level 3 must be taken prior no later than **15 Mar 2015**. If selected for training, the applicants training offer and approval to enter GME are contingent on passing and obtaining the results of the Step/Level 3 by **30 Apr 2015**. Plan accordingly as there are no exceptions to this requirement. Your assignment will be initiated upon Physician Education's receipt of the passing Step/Level 3 score.
2. Allow four to eight weeks to receive the Step/Level 3 results. Once you receive the Step/Level 3 scores, you are responsible for providing a copy to this office NLT **30 April 2015**.
3. Upload into MODS this Intention Form as a part of your JSGMESB application which is due no later than **14 September 2014**.
4. This letter requires signature from your current Program Director and Director of Medical Education (DME). A copy of the original must be uploaded into MODS as a part of your JSGMESB application package which is due no later than 14 September 2014. This letter **MUST** accompany your application to the JSGMESB.

Member Acknowledgement

I, _____, am scheduled to take USMLE/COMLEX Step/Level 3 on _____
(Print Name) (Date)

I certify the above statement to be true and accurate. _____
(Applicant Signature)

Program Director Acknowledgement

I have reviewed with the applicant his/her intentions for taking Step/Level 3 and will monitor completion. I will ensure AFPC Physician Education is alerted of any changes in the above test date.

(Program Director Printed Name and Signature)

(Date)

Director of Medical Education Acknowledgement

I have been made aware of the requirement for Step/Level 3 to be taken no later than **15 March 2015** and approve applicant's intent to take USMLE/COMLEX Step/Level 3 on _____ (Date).

(Director of Medical Education Printed Name and Signature)

(Date)

Please maintain a copy in the applicant's local GME file and provide the original back to the applicant

DEROS Letter of Intention Template (on Letterhead)
*****Guidance for Overseas Applicants who will Require Deros Curtailment*****

Date

MEMORANDUM FOR ALL 2014 JSGMESB OVERSEAS APPLICANTS

FROM: AFPC/DPANE Physician Education

SUBJECT: Commander's Letter of Intention for Deros waiver

If the requested Deros waiver is greater than 12 months, the applicant IS NOT eligible to apply to the 2014 JSGMESB

1. All applicants requiring a Deros waiver to enter training must have a memorandum signed by the Commander and coordinated through the MAJCOM/SG that, if selected for training, a Deros waiver would be supported.
2. Ensure the Commander is aware that coordination must occur through the MAJCOM/SG before approving the early release date for training. Do not submit a request for a Deros curtailment prior to the JSGMESB. The purpose of this Deros letter is for the Commander to inform the JSGMESB of his/her intent to support the waiver request. It is mandatory for all applicants with a Deros after 1 June of the year of an anticipated GME training start.
3. This letter must accompany your application. Without Commander and MAJCOM/SG approval your application **will not** meet the JSGMESB. If selected for training, the new Deros as recommended by the Commander in this Deros letter will be updated by Physician Education simultaneously with assignment processing.
4. Following is a sample which can be used by the Commander recommending approval of the Deros waiver:

I am aware that rank/name has applied to the 2014 JSGMESB and will require a Deros waiver to enter training beginning 1 July 2015 or 1 July 2016 (as applicable), with mandatory orientation typically starting the first week of June (for AD facilities).

Rank/name's current Deros is _____, and contingent upon selection by the JSGMESB he/she will require a _____ month (s) waiver, I am willing to release name/rank on _____. This is the earliest date I will support his/her release.

I have coordinated with the MAJCOM/SG and the Deros waiver will be supported.

SQUADRON COMMANDER (or equivalent) Signature

1st Ind, XX MDG/CC

MEMORANDUM FOR HQ AFPC/DPANE

Concur/non concur

Second Choice Form

This form is required by all applicants, whether or not an applicant has a second choice for specialty (Example: first specialty choice is Internal Medicine and second specialty choice is Family Medicine). If an applicant has only one choice for specialty but wishes to list more than one placement preference, list this information on the second page of the two-page DoD application (DPANE Form 4117).

(CHECK ONE)

1. _____ **I do** have a second choice for specialty/subspecialty training. (Complete items 2-5.)

_____ **I do NOT** have a second choice for specialty/subspecialty training. (Do not complete sections 2-5. Sign/date at bottom)

2. If I am not selected for my first choice, I wish to be considered for the following as my **second** choice preference. I have ranked my preference for training location for my **second** choice below. (This is **only** applicable if I am **NOT** selected for my first choice).

3. SECOND CHOICE TRAINING REQUESTED

Specialty _____

Program Length _____ year(s) Start Date _____

4. **TRAINING PREFERENCES:** (Please rank order preference desired, with "1" being your first choice).

- | | | |
|--|--|--|
| <input type="checkbox"/> David Grant | <input type="checkbox"/> Scott | <input type="checkbox"/> Army |
| <input type="checkbox"/> Eglin | <input type="checkbox"/> Wright Patterson | <input type="checkbox"/> Navy |
| <input type="checkbox"/> Ehrling Bergquist | <input type="checkbox"/> NCC (NCC, Ft Belvoir, USUHS) | <input type="checkbox"/> Deferred/Redeferred |
| <input type="checkbox"/> Keesler | <input type="checkbox"/> USAFSAM (RAM/Hyperbaric only) | <input type="checkbox"/> Civilian Sponsored |
| <input type="checkbox"/> Nellis | | |
| <input type="checkbox"/> SAUSHEC | | |

5. In the event that you are selected as an alternate for your first choice, your application will **NOT** proceed for review by your second choice unless you request. Please indicate below your preference regarding your second choice/alternate status.

- ☐ Keep me as an alternate for my first choice. I understand that if chosen as an alternate, my application will not be sent to my second choice for consideration.
- ☐ Do not keep me for an alternate position, send my application to my second choice for consideration.

NAME _____ RANK _____
(LAST, FIRST, MI)

SIGNATURE _____ DATE _____

*****FITNESS STATEMENT TEMPLATE*****

1. Must be completed by appointed Unit Fitness Monitor or Commander
2. If your current fitness score is below 75 or you failed a component, it is mandatory that your Squadron or Group Commander complete this form. Your fitness test score must be current through the end of the year and must be received with your application package no later than 14 September 2014.

<<LETTERHEAD>>

Date_____

MEMORANDUM FOR 2014 JSGMESB

FROM: SQUADRON OR GROUP COMMANDER

SUBJECT: Fitness Statement for Rank Applicant Name

1. _____ is applying to the 2014 JSGMESB for consideration for Graduate Medical Education.
2. The member completed their fitness test on _____ and has a composite score of _____. The member is / is not current in the Air Force fitness program.
3. This paragraph is to be completed only if the applicant's overall fitness category is "Unsatisfactory" with a **score below 75 or if the applicant failed a component.**
 - a. The member is / is not recommended to attend GME
 - b. The member is / is not enrolled in the Fitness Improvement Program.
 - c. Additional comments, if necessary:

4. If the member's fitness status changes prior to entering GME, I will alert AFPC Physician Education and make recommendations accordingly.

SIGNATURE BLOCK
Squadron Fitness Representative or
Squadron or Group Commander

2014 Graduate Medical Education - Statement of Understanding (ACTIVE DUTY)

NAME (PRINT) _____

- a. Individuals applying for active duty (AD) training in other than Air Force (AF) medical facilities will be considered for AF or other DoD training programs before being considered for civilian sponsorship. AF members cannot give final acceptance to a program offer until official written notification of final selection for that program is provided by the AF. AF members choosing civilian programs with rotations away from the primary teaching facility may be required to participate in these rotations at their own expense.
- b. Individuals applying for subspecialty training, who have completed basic residency training more than three years prior to application, will be required to have board certification in the basic specialty in order to be considered for further training.
- c. Applications for second residencies must have a minimum of five years of practice experience after completion of initial residency; be board certified in their initial specialty; and be in the grade of lieutenant colonel or below before being considered for training in a second residency.
- d. I understand if I am selected for and subsequently enter a graduate medical education (GME) program under AF sponsorship, in either a military or civilian facility, I will incur an active duty service commitment (ADSC) for education and training. This ADSC is computed in accordance with the applicable AF Instruction in effect at the time my training program will commence. I will receive written notification of my selection status and projected ADSC following completion of the JSGMESB. I further understand I have a personal responsibility to review and verify my ADSC in accordance with applicable AF Instructions.
- e. I do have, or will request to obtain, the retainability to complete the training and the ADSC associated with the training.
- f. I understand that if I am non-selected for promotion to Lt Col or below, I will be ineligible for GME training. I agree that if I am twice non-selected for promotion during GME training or upon completion of GME training I will remain in AD until such time as I have fulfilled the ADSC associated with the training, even if that commitment will extend beyond what would otherwise be the date of my release from AD as a result of non-selection for promotion. I understand that Title 10 public law mandates the completion of all Health Professions ADSC prior to separating the AF, regardless of non-selection of promotion. I agree to accept selective continuation on AD, if offered, rather than request separation as a result of being twice non-selected for promotion.
- g. I will maintain a current, valid and unrestricted state medical license and will only enter the civilian match for training (to include length of training) as approved by the JSGMESB.
- h. If I am in my first post graduate year, I will take USMLE/COMLEX Step/Level 3 no later than **15 March 2015**. If selected for training, I must complete all academic requirements of my current internship program, before I will be authorized release to new training program. I understand that my selection for GME is contingent upon providing Physician Education a passing score by **30 April 2015**.
- i. If I am in my PGY-2 year, I will include Step/Level 3 results in my JSGMESB application package by the **14 September 2014** deadline.
- j. In accordance with AFI 44-102, Section 1.9, I understand that I am prohibited from pursuing off-duty employment (i.e. moonlighting) while in training. Physician Education has the authority to remove me from training in the event off-duty employment occurs.
- k. If I am selected for training in civilian sponsored status, I will remain on AD under the command/control of AFIT. I am prohibited from receiving a salary, stipend, or other monetary awards, other than my AD entitlements.
- l. Selected for promotion with anticipated pin-on **PRIOR TO** separating into the redeferred program: If I am selected by an AD promotion board and my pin-on date occurs prior to my separation I will separate in the new grade. I will carry this promotion through the length of my re-deferment; however, I **will not** meet a Reserve promotion board to be considered for the next higher grade. I will however, be awarded day for day credit to be calculated upon my re-accession onto AD at the completion of my training.
- m. Selected for promotion with anticipated pin-on **AFTER** separating into the redeferred program: If I am selected by an AD promotion board and my pin-on date occurs after my separation I will be eligible for promotion based on Reserve rules, in effect during the time of my re-deferment. In the event I am promoted in the Reserves, I will carry this promotion upon my re-accession to AD.
- n. Not considered by AD Promotion Board **PRIOR TO** separating into the redeferred program: I **will not** meet a Reserve promotion board to be considered for the next higher grade. I will meet the first scheduled promotion board and be awarded day for day credit to be calculated upon my re-accession onto AD at the completion of my training.
- o. I understand, if I am selected by the JSGMESB, I will be required to work in a clinical capacity (in the specialty to which I trained) for at least two years after GME completion, unless the AF/SG waives this requirement due to the needs of the AF mission.
- p. If I have any questions regarding special pays and if the ADSC associated with this GME training will affect my pay, I will contact the Medical Special Pay Branch at 210-565-2377. If selected for GME, my training ADSC will be calculated by Physician Education.

SIGNATURE _____

DATE _____

1. APPLICANT'S NAME	2. Last 4 SSN	3. SPECIALTY CHOICE
Last: First, MI:		

**ACGME
AMERICAN OSTEOPATHIC ASSOCIATION
DUAL ACCREDITATION**

☐ INTERN (90 Days) ☐ INTERN (Year Only) ☐ RESIDENCY ☐ FELLOWSHIP

mm/dd/yyyy	UNTIL	mm/dd/yyyy
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Top 25%	Middle 50%	Bottom 25%
# trainees in peer group in each category		

[illegible]

12. Provide specific comments on this individual's performance including any significant problems noted during training or reservations about qualification for further training.

<input type="checkbox"/>	I highly recommend her/him for further GME
<input type="checkbox"/>	I recommend her/him for further GME
<input type="checkbox"/>	I do not recommend her/him for further GME

15. DATE